

Town of North Hempstead

Department of Building Safety, Inspection & Enforcement

210 Plandome Road, Manhasset, NY 11030-2326 • Tel. 516-869-6311 • Fax 516-869-7662

www.northhempsteadny.gov

Appl. Number: _____ Permit Number: _____

(Official Use Only)

FUEL OIL TANK REMOVAL, ABANDONMENT AND / OR INSTALLATION

Supplemental attachment to applications for permits for fuel oil tank removal, abandonment and / or installation

Section: _____ Block: _____ Lot(s): _____

Property Address: _____

Owner: _____

Telephone #: _____ Cell # _____

Contractor Name: _____

Contractor Address: _____

Telephone #: _____ Cell # _____

E-mail: _____ Fax # _____

Scope of work: _____

EXISTING TANK(S) TO BE REMOVED INFORMATION (indicate indoors or outdoors):

Tank size: 275 Gal: _____ 550 Gal: _____ 1,000 Gal: _____ Other: _____

Fill material: Sand: _____ Foam: _____ Concrete: _____ Other: _____ Removal: _____

PROPOSED TANK(S) INFORMATION:

Tank size 275 Gal _____ Location: indoors / outdoors _____

550 Gal _____ Location: indoors / outdoors _____

1,000 Gal _____ Location: indoors / outdoors _____

Other _____ Location: indoors / outdoors _____

Please attach a copy of the Nassau County Health Department tank removal or abandonment forms necessary for your individual case. Contact the Health Department at 106 Charles Lindbergh Boulevard, Uniondale, NY 11553 to understand which form(s) you need.

Telephone: 516-227-9691 Fax: 227-9613

Attach a survey indicating the location of the proposed and/or abandoned tanks

Provide setback to property line for any new outdoor tank. Depending on location, protective bollards may be necessary for the safety and integrity of the tank.



TOWN OF NORTH HEMPSTEAD

Department of Building, Safety Inspection, and Enforcement
210 Plandome Road, P.O. Box 3000, Manhasset, NY 11030-2327
Tel.: 516.869.6311 Fax: 516.869.7662
www.northhempsteadny.gov

Dear Homeowner / Contractor,

Please be advised, the **Abandonment or Removal of an Oil Tank** is regulated by Article XI of the Nassau County Public Health Ordinance. All abandonments/ removals must be performed in accordance with this regulation and proper notification must be made to Nassau County before beginning any work.

For additional information on this ordinance and the notification procedure, please contact:

Nassau County Department of Health
200 County Seat Drive
Mineola NY 11501
Telephone: 516-227-9691

We appreciate your cooperation in this matter.

Thank you,

Town of North Hempstead
Building Department

Nassau County Department of Health
Small Facility/Homeowner Tank Abandonment
Notification Form

Date of Job ____/____/____

****All notifications must be received by
NCDH 7 days prior to the date of the job
accompanied by a fee of \$70.00 per tank.**

Contractor _____

Phone # _____

Name of Property Owner _____

Address _____

Village _____ Telephone _____

Existing Tank Information:

Tank Size:

_____ 275

_____ 550

_____ 1,000

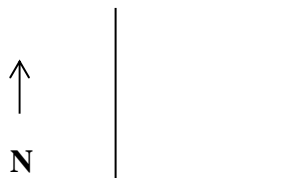
Fill Material:

_____ Sand

_____ Concrete

_____ Approved Foam

Tank Location Diagram:



New Installation:

Tank Size

Location

_____ 275

_____ Above ground on pad/containment

_____ 550

_____ Below ground

_____ 1,000

_____ Indoors

_____ Conversion to gas

****All removals/abandonments, installations etc. must be done in accordance with Article XI of the Nassau County Public Health Ordinance. This form is to be used only when the individual storage tank capacity is 1100 gallons or less.**

PLEASE RETURN VIA U.S. MAIL to Bureau of Environmental Protection, Nassau County Department of Health, Attention: Article XI, 200 County Seat Drive, Mineola, N.Y. 11501. Telephone number: 516-227-9691.



**NASSAU COUNTY
DEPARTMENT OF HEALTH**
106 CHARLES LINDBERGH BOULEVARD
UNIONDALE, NY 11553
516 227-9691
FAX: 516 227-9613

**BUREAU OF ENVIRONMENTAL PROTECTION
AFFIRMATION OF NON-LEAKING TANK**

Re: _____

(Address)

I (we), _____ swear and affirm that I(we) own the above referenced property and that to the best of my(our) knowledge the underground tank and its associated piping used for storing oil solely for on-site space heating and/or water heating, located on this property, is not now leaking and has never leaked. **This form may not be used where there is any re-occurring accumulation of water in the tank.**

(Signature of Property Owner(s))

Affirmation must be received by NCDH
seven (7) days prior to the date of the job.

Sworn to before me this

_____ day of _____, _____
date month year

THIS FORM MUST BE SIGNED AND NOTARIZED BEFORE RETURNING VIA U.S. MAIL to the Nassau County Department of Health, Bureau of Environmental Protection, 106 Charles Lindbergh Boulevard, Att: Article XI, Uniondale, NY 11553

